

APPLICATION NO.

(For Office use only)

CATEGORY NO.



Date :

INDIAN INSTITUTE OF AYURVEDIC PHARMACEUTICAL SCIENCES

Gujarat Ayurved University, Jamnagar

A.K.Jamal Building, Guru Nanak Road, Jamnagar – 361008, Ph. / Fax : 0288 – 2555746

website: www.iaps.ac.in, www.ayurveduniversity.com and Email: iaps@ayurveduniversity.com

Application form

For

D.Pharm (Ayurved) / B.Pharm (Ayurved)

20 - 20

Name of the applicant: Mr./Miss./Mrs (In Capital Letters)

1.

<input type="text"/>	<input type="text"/>	<input type="text"/>
(Surname)	(Name)	(Father's Name)

2. Examination passed

- a. S.S.C.
- b. H.S.C. (Sci.)
- c. D.Pharm (Ayu.)

FOR OFFICE USE ONLY

Remarks

Merit Marks

Verified by :

Sr. No.
(Admission)

Checked by :

Admitted at

Signature of
Officer

GENERAL INSTRUCTIONS FOR COMPLETING ADMISSION FORM

Fill up the application form in CAPITAL LETTERS ONLY. Please tick the appropriate box wherever provided.

COVER PAGE

- a. Write Name, Qualifying Exam Seat N. & year of Passing as per standard 12th mark sheet or D.Pharm (Ayu.) at the space provided.
- b. Attach a DD of Nationalized Bank worth Rs. 350/- in favour of **“The Principal-IIAPS, Jamnagar”** and payable at Jamnagar.

FORM

- a. Candidate’s Name: Write name as printed in Standard 12th mark sheet or D.Pharm (Ayu.). Write Mother’s Name in the boxes provided.
- b. Attach a duly signed photograph in the prescribed form
- c. Board from which standard 12th (H.S.C.) Examination passed: Please tick appropriate box provided, along with the code of your group.
- d. Category: Please tick the appropriate box. Attested copy of caste certificate to be attached, if applicable.
 - a. Please write your caste and sub-caste as per school leaving certificate / transfer certificate in the boxes provided, if applicable.
- e. Date of Birth (As per S.S.C.): write your date of birth, as per standard 10th Certificate / School leaving certificate / transfer certificate.
- f. Write your complete address for communication including Taluka, District and Pincode. Give your Residence phone number, mobile phone number with STD code and email ID.
- g. **Attach a self addressed envelope (12cm x 4cm) affixed with Rs. 25/- postal stamp along with the admission form.**
- h. For more information please visit our website: www.iaps.ac.in & www.ayurveduniversity.com and email: iaps@ayurveduniversity.com or **Phone / Fax: +91-288-2555746.**
- i. On cancellation of admission, 50% amount of the fees will be refunded within a month of admission.



6. If you are son / daughter of the following categories, mention the code

1. All India service officer (Viz., IPS, IFS) allotted to Gujarat State and serving outside the Gujarat State on deputation.
2. Gujarat Govt. servants who have been posted outside the Gujarat State for administrative reasons.
3. Not applicable

7. Write address for correspondence

Pin Code

Phone No.

Mob. No.

E-mail ID

LIST OF COPIES OF DOCUMENTS TO BE ATTACHED

Please in the box of attached copies.

1. H.S.C. (12th) Mark sheet of all attempts and attempt certificate or Attested Xerox copy of D. Pharm. (Ayu.) final year mark sheet
2. S.S.C./ Matriculation Certificate
3. School leaving certificate (SLC)/ Transfer certificate (TC) and evidence of place of birth, if it is not mentioned in SLC/TC (Two attested copies for SC, ST & SEBC Candidates)
4. Caste certificate of SC, ST, SEBC or others from the competent authority in prescribed Performa (Two attested Xerox copies)
5. Non-creamy layer certificate of family from the competent authority in prescribed (for SEBC category only) for current year issued after 1st April 2007 (Two attested Xerox copies)
6. Copy of passport if held.
7. Certificate for staff quota in prescribe Performa.
8. One self addressed envelope (12cm x 4cm) with postal stamp of Rs. 25/-
9. Domicile and Nationality Certificate
10. Proxy letter [In case of candidates unavailability to attend an interview]
11. DDD of Nationalized Bank

I hereby declare that the information given above is true. If found false, I understand that my admission will be cancelled. I shall abide by the rules & norms of discipline of the institute I join. I also undertake to pay the necessary fees as decided.

Signature of Parent/Guardian

Date and Place

Signature of Candidate